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Why Does My Jaw Hurt or Click?

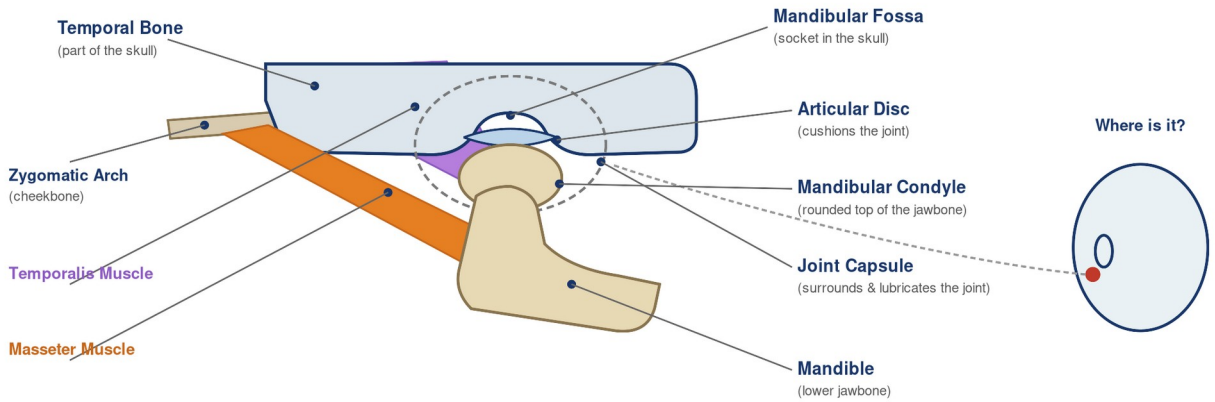
Understanding Temporomandibular Joint Dysfunction (TMD)

What Is Causing Jaw Pain?

Temporomandibular dysfunction (TMD) refers to pain and irregular movement in the joint connecting your jawbone to your skull, just in front of each ear. It's one of the most common chronic pain conditions, affecting an estimated 11 to 33 million Americans, and can involve the joint itself, the surrounding chewing muscles, or both.

The Temporomandibular Joint (TMJ)

Side view, where the jawbone meets the skull



Simplified schematic for patient education purposes — not to exact anatomical scale.

What Does It Feel Like?

- Pain or tenderness in the jaw, temple, ear, or cheek — especially with chewing
- Clicking, popping, or grating sounds when opening or closing the mouth
- A jaw that locks, gets stuck, or feels like it's catching
- Reduced ability to open the mouth fully
- Headaches, earaches, or a feeling of fullness in the ear
- Neck and shoulder tension that seems connected to jaw symptoms

What Causes It?

- Clenching or grinding the teeth (bruxism), especially during sleep
- Jaw muscle tension related to stress
- Poor head and neck posture (including prolonged forward-head posture at a desk or phone)
- A prior jaw injury or whiplash
- Joint hypermobility or arthritis affecting the jaw joint
- Habits like nail-biting, gum chewing, or resting the chin on a hand

What Makes It Worse?

- Chewing tough or chewy foods, or wide bites (like a large sandwich or apple)
- Prolonged talking, singing, or yawning widely
- Stress and clenching, particularly overnight
- Poor posture during desk work or phone use
- Resting on or supporting weight through the chin or jaw

When Should I Be Concerned?

- The jaw locks open or closed and won't release
- Sudden change in how your teeth fit together (your bite feels different)
- Significant swelling, fever, or signs of infection
- Pain or symptoms that don't improve after several weeks of conservative care

Prevention Techniques

- Practice relaxed jaw posture: lips together, teeth slightly apart, tongue resting on the roof of the mouth
- Manage stress — clenching is one of the biggest drivers of TMD flare-ups
- Maintain good head and neck posture, especially during desk work and phone use
- Avoid wide yawns, excessive gum chewing, and nail-biting
- Cut food into smaller pieces to avoid wide, forceful bites
- Ask your dentist about a night guard if you grind your teeth while sleeping
- Apply gentle heat to tight jaw muscles before activities that require a lot of talking or chewing

The Good News

The large majority of TMD cases improve with conservative, non-surgical care. Physical therapy — including manual therapy, jaw and postural exercises, and education on habits that load the joint — is considered a first-line treatment and helps address the muscular and postural contributors that are often the real driver of symptoms.

Most patients see meaningful improvement within **4 to 8 weeks** of a consistent physical therapy program, though flare-ups can recur if underlying habits like clenching or poor posture aren't addressed.
